



CONTRACTOR
'EMPLOYEE/CORE CREW/SPECIALIZED CREW' INFORMATION SHEET

NAME: _____

EMPLOYER: _____

EMPLOYER ADDRESS: _____

YOUR
EMPLOYEES'
TRIBAL
INFORMATION

PLEASE PROVIDE COPY FOR INDIAN PREFERENCE:

TRIBE: _____ ENROLLMENT NUMBER: _____

DO YOU HAVE A VALID DRIVERS LICENSE? : YES _____ NO _____

DO YOU HAVE A VALID FLAGGERS'S CARD? YES _____ NO _____

UNION MEMBER: YES ___ NO _____ LOCAL #: _____

JOB EXPERIENCE:

COMPANY NAME

POSITION HELD

DATES

_____	_____	_____
_____	_____	_____
_____	_____	_____

LIST TRAINING SKILLS OR WORK EXPERIENCE:

LIST COLLEGE, VOCATIONAL, TECHNICAL TRAINING and/or CERTIFICATES:

READ AND SIGN:

I HEREBY AFFIRM THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE THAT ANY FALSIFIED INFORMATION OR SIGNIFICANT OMISSIONS SHALL DISQUALIFY ME FROM CONSIDERATION FOR EMPLOYMENT.

SIGNATURE: _____

DATE: _____